

CLAIMS ONLY	Application Number	Filing Date
	101621737	
	Applicant(s)	

10/1021737  
Applicant(s)

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
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47						
48						
49						
50						
Total Indep	3					
Total Depend	15					
Total Claims	18					

May be used for additional claims or amendments						
	Indep		Depend		Indep	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						